

Rec'd PCT/PTO 12 OCT 2004  
23082

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only:

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference  
(if desired) (12 characters maximum) 798/WO/CA

Box No. I TITLE OF INVENTION  
PROCEDURE AND SYSTEM FOR SCHEDULING A SHARED RESOURCE AMONG MULTIPLE INFORMATION PACKET FLOWS

Box No. II APPLICANT

This person is also inventor

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

TELECOM ITALIA LAB S.P.A.  
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Faximile No.  
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Teleprinter No.

Applicant's registration No. with the Office

State (that is, country) of nationality:  
ITALY

State (that is, country) of residence:  
ITALY

This person is applicant  
for the purposes of:

all designated  
States

all designated States except  
the United States of America

the United States  
of America only

the States indicated in  
the Supplemental Box

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

LENZINI, Luciano  
c/o TELECOM ITALIA LAB S.P.A.  
Via Reiss Romoli, 274  
I-10148 TORINO  
ITALY

This person is:

applicant only

applicant and inventor

inventor only (If this check-box  
is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:  
ITALY

State (that is, country) of residence:  
ITALY

This person is applicant  
for the purposes of:

all designated  
States

all designated States except:  
the United States of America

the United States  
of America only

the States indicated in  
the Supplemental Box

Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf  
of the applicant(s) before the competent International Authorities as:

agent

common  
representative

Name and address: (Family name followed by given name; for a legal entity, full official designation.  
The address must include postal code and name of country.)

TELECOM ITALIA LAB S.P.A.  
IPR Management  
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Teleprinter No.

Agent's registration No. with the Office

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the  
space above is used instead to indicate a special address to which correspondence should be sent.

See Notes to the request form

Form PCT/RO/101 (first sheet) (March 2001; reprint January 2002)

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## Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

If none of the following sub-boxes is used, this sheet should not be included in the request.

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

MINGOZZI, Enzo  
c/o TELECOM ITALIA LAB S.P.A.  
Via Reiss Romoli, 274  
I-10148 TORINO  
ITALY

This person is:

- applicant only  
 applicant and inventor  
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:  
ITALYState (that is, country) of residence:  
ITALY

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

SCARRONE, Enrico  
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Via Reiss Romoli, 274  
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This person is:

- applicant only  
 applicant and inventor  
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:  
ITALYState (that is, country) of residence:  
ITALY

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

STEA, Giovanni  
c/o TELECOM ITALIA LAB S.P.A.  
Via Reiss Romoli, 274  
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ITALY

This person is:

- applicant only  
 applicant and inventor  
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:  
ITALYState (that is, country) of residence:  
ITALY

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

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This person is:

- applicant only  
 applicant and inventor  
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

State (that is, country) of residence:

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Further applicants and/or (further) inventors are indicated on another continuation sheet.

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**Box No. V DESIGNATION OF STATES**

Mark the applicable check boxes below; at least one must be marked.

The following designations are hereby made under Rule 4.9(a):

## Regional Patent

- AP ARIPO Patent: GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, MZ Mozambique, SL Sierra Leone, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZM Zambia, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT (*if other kind of protection or treatment desired, specify on dotted line*) .....

EA Eurasian Patent: AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT

EP European Patent: AT Austria, BE Belgium, CH & LI Switzerland and Liechtenstein, CY Cyprus, DE Germany, DK Denmark, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, SE Sweden, TR Turkey, and any other State which is a Contracting State of the European Patent Convention and of the PCT

OA OAPI Patent: BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GQ Equatorial Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (*if other kind of protection or treatment desired, specify on dotted line*) .....

National Patent (if other kind of protection or treatment desired, specify on dotted line):

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> AE United Arab Emirates               | <input checked="" type="checkbox"/> GM Gambia                                    | <input checked="" type="checkbox"/> NZ New Zealand                 |
| <input checked="" type="checkbox"/> AG Antigua and Barbuda                | <input checked="" type="checkbox"/> HR Croatia                                   | <input checked="" type="checkbox"/> OM Oman                        |
| <input checked="" type="checkbox"/> AL Albania                            | <input checked="" type="checkbox"/> HU Hungary                                   | <input checked="" type="checkbox"/> PH Philippines                 |
| <input checked="" type="checkbox"/> AM Armenia                            | <input checked="" type="checkbox"/> ID Indonesia                                 | <input checked="" type="checkbox"/> PL Poland                      |
| <input checked="" type="checkbox"/> AT Austria                            | <input checked="" type="checkbox"/> IL Israel                                    | <input checked="" type="checkbox"/> PT Portugal                    |
| <input checked="" type="checkbox"/> AU Australia                          | <input checked="" type="checkbox"/> IN India                                     | <input checked="" type="checkbox"/> RO Romania                     |
| <input checked="" type="checkbox"/> AZ Azerbaijan                         | <input checked="" type="checkbox"/> IS Iceland                                   | <input checked="" type="checkbox"/> RU Russian Federation          |
| <input checked="" type="checkbox"/> BA Bosnia and Herzegovina             | <input checked="" type="checkbox"/> JP Japan                                     |  |
| <input checked="" type="checkbox"/> BB Barbados                           | <input checked="" type="checkbox"/> KE Kenya                                     | <input checked="" type="checkbox"/> SD Sudan                       |
| <input checked="" type="checkbox"/> BG Bulgaria                           | <input checked="" type="checkbox"/> KG Kyrgyzstan                                | <input checked="" type="checkbox"/> SE Sweden                      |
| <input checked="" type="checkbox"/> BR Brazil                             | <input checked="" type="checkbox"/> KP Democratic People's Republic of Korea     | <input checked="" type="checkbox"/> SG Singapore                   |
| <input checked="" type="checkbox"/> BY Belarus                            | <input checked="" type="checkbox"/> KR Republic of Korea                         | <input checked="" type="checkbox"/> SI Slovenia                    |
| <input checked="" type="checkbox"/> BZ Belize                             | <input checked="" type="checkbox"/> KZ Kazakhstan                                | <input checked="" type="checkbox"/> SK Slovakia                    |
| <input checked="" type="checkbox"/> CA Canada                             | <input checked="" type="checkbox"/> LC Saint Lucia                               | <input checked="" type="checkbox"/> SL Sierra Leone                |
| <input checked="" type="checkbox"/> CH & LI Switzerland and Liechtenstein | <input checked="" type="checkbox"/> LK Sri Lanka                                 | <input checked="" type="checkbox"/> TJ Tajikistan                  |
| <input checked="" type="checkbox"/> CN China                              | <input checked="" type="checkbox"/> LR Liberia                                   | <input checked="" type="checkbox"/> TM Turkmenistan                |
| <input checked="" type="checkbox"/> CO Colombia                           | <input checked="" type="checkbox"/> LS Lesotho                                   | <input checked="" type="checkbox"/> TN Tunisia                     |
| <input checked="" type="checkbox"/> CR Costa Rica                         | <input checked="" type="checkbox"/> LT Lithuania                                 | <input checked="" type="checkbox"/> TR Turkey                      |
| <input checked="" type="checkbox"/> CU Cuba                               | <input checked="" type="checkbox"/> LU Luxembourg                                | <input checked="" type="checkbox"/> TT Trinidad and Tobago         |
| <input checked="" type="checkbox"/> CZ Czech Republic                     | <input checked="" type="checkbox"/> LV Latvia                                    |  |
| <input checked="" type="checkbox"/> DE Germany                            | <input checked="" type="checkbox"/> MA Morocco                                   | <input checked="" type="checkbox"/> TZ United Republic of Tanzania |
| <input checked="" type="checkbox"/> DK Denmark                            | <input checked="" type="checkbox"/> MD Republic of Moldova                       | <input checked="" type="checkbox"/> UA Ukraine                     |
| <input checked="" type="checkbox"/> DM Dominica                           |  | <input checked="" type="checkbox"/> UG Uganda                      |
| <input checked="" type="checkbox"/> DZ Algeria                            | <input checked="" type="checkbox"/> MG Madagascar                                | <input checked="" type="checkbox"/> US United States of America    |
| <input checked="" type="checkbox"/> EC Ecuador                            | <input checked="" type="checkbox"/> MK The former Yugoslav Republic of Macedonia |  |
| <input checked="" type="checkbox"/> EE Estonia                            |  | <input checked="" type="checkbox"/> UZ Uzbekistan                  |
| <input checked="" type="checkbox"/> ES Spain                              | <input checked="" type="checkbox"/> MN Mongolia                                  | <input checked="" type="checkbox"/> VN Viet Nam                    |
| <input checked="" type="checkbox"/> FI Finland                            | <input checked="" type="checkbox"/> MW Malawi                                    | <input checked="" type="checkbox"/> YU Yugoslavia                  |
| <input checked="" type="checkbox"/> GB United Kingdom                     | <input checked="" type="checkbox"/> MX Mexico                                    | <input checked="" type="checkbox"/> ZA South Africa                |
| <input checked="" type="checkbox"/> GD Grenada                            | <input checked="" type="checkbox"/> MZ Mozambique                                | <input checked="" type="checkbox"/> ZM Zambia                      |
| <input checked="" type="checkbox"/> GE Georgia                            | <input checked="" type="checkbox"/> NO Norway                                    | <input checked="" type="checkbox"/> ZW Zimbabwe                    |
| <input checked="" type="checkbox"/> GH Ghana                              |  |  |

1.6. Contracting States which have become party to the PCT after issuance of this sheet:

Check-boxes below reserved for designating States which have Section 141  
 .....  .....  .....

**Precautionary Designation Statement:** In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (*Confirmation (including fees) must reach the receiving Office within the 15-month time limit.*)

**Box No. VI PRIORITY CLAIM**

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country	regional application: regional Office	international application: receiving Office
item (1) 12/04/2002	TO2002A000326	ITALY		
item (2)				
item (3)				
item (4)				
item (5)				

Further priority claims are indicated in the Supplemental Box.

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office) identified above as:

all items     item (1)     item (2)     item (3)     item (4)     item (5)     other, see  
Supplemental Box

\* Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)):

**Box No. VII INTERNATIONAL SEARCHING AUTHORITY**

Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):

ISA / EP

Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):

Date (day/month/year)                      Number                      Country (or regional Office)

**Box No. VIII DECLARATIONS**

The following declarations are contained in Boxes Nos. VIIII (i) to (v) (mark the applicable check-boxes below and indicate in the right column the number of each type of declaration):

Number of declarations

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Box No. VIII (i)             | Declaration as to the identity of the inventor   | : |
| <input checked="" type="checkbox"/> Box No. VIII (ii) | Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent             | 1 |
| <input type="checkbox"/> Box No. VIII (iii)           | Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application | : |
| <input checked="" type="checkbox"/> Box No. VIII (iv) | Declaration of inventorship (only for the purposes of the designation of the United States of America)                               | 1 |
| <input type="checkbox"/> Box No. VIII (v)             | Declaration as to non-prejudicial disclosures or exceptions to lack of novelty   | : |

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**Box No. VIII (ii) DECLARATION: ENTITLEMENT TO APPLY FOR AND BE GRANTED A PATENT**

The declaration must conform to the standardized wording provided for in Section 2.2; see Notes to Boxes Nos. VII, VIII (i) to (v) (in general) and the specific Notes to Box No. VIII (ii). If this Box is not used, this sheet should not be included in the request.

Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent (Rules 4.17(ii) and 51bis.1(a)(ii)), in a case where the declaration under Rule 4.17(iv) is not appropriate:

**IN RELATION TO THIS INTERNATIONAL APPLICATION, TELECOM ITALIA LAB S.P.A.  
IS ENTITLED TO APPLY FOR AND BE GRANTED A PATENT BY VIRTUE OF THE  
FOLLOWING: AN ASSIGNMENT FROM**

LENZINI, Luciano  
c/o TELECOM ITALIA LAB S.P.A.  
Via Reiss Romoli, 274  
I-10148 TORINO  
ITALY

MINGOZZI, Enzo  
c/o TELECOM ITALIA LAB S.P.A.  
Via Reiss Romoli, 274  
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SCARRONE, Enrico  
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STEA, Giovanni  
c/o TELECOM ITALIA LAB S.P.A.  
Via Reiss Romoli, 274  
I-10148 TORINO  
ITALY

TO

TELECOM ITALIA LAB S.P.A., dated 6 June 2002

THIS DECLARATION IS MADE FOR THE PURPOSES OF ALL DESIGNATIONS,  
EXCEPT THE DESIGNATION OF THE UNITED STATES OF AMERICA.

This declaration is continued on the following sheet, "Continuation of Box No. VIII (ii)".

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